

Verification of Food Service Applications

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Approval vs. Verification

- Application approval - approving an application as submitted – face value
- Verification - verifying income with additional income documentation

Introduction

- Verify applications for free and reduced price meals.
- This session is for conducting the verification process with little problems.
- The process should help your individual schools keep or increase free and reduced eligibility numbers.

Families may not cooperate because;

- no longer qualify
 - level of their education creates a disability or embarrassment
 - Language issues.
-
- Some cases the local school is able to help families directly with the verification process.



Who is not required to complete verification process,

however must file:

- RCCI' s, no day students
- Schools in milk only program
- Schools/Districts under Provision I, II or III – after the base year, CEP

Even if your District is not required to complete Verification

The Verification Report **MUST** be submitted online by November 20

Forms Page:

<http://www.maine.gov/doe/nutrition/forms/verificationreport.html>

Agency Information and:

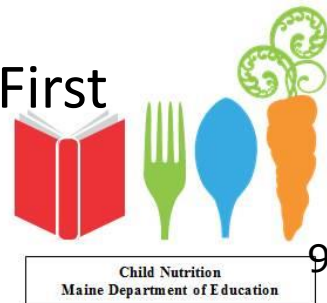
- Sections 1 to 5-1 must be filled out by all Schools participating in the NSLP or SBP.

What is a School District?

- A School District is related to school boards
- An RSU/MSAD has one school board therefore one district
- An AOS/Union may have several school boards therefore several districts

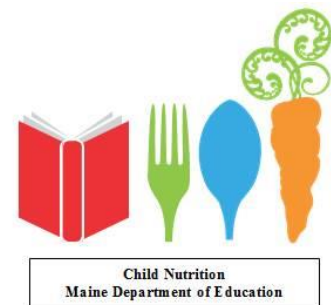
Types of Verification

- Standard or Error Prone – Required
 - 3% all approved applications
 - Taken from error prone apps.
- Alt One: Random
 - 3% all approved applications, completely random
- Alt Two: Focused
 - 1% approved income applications, Error Prone First
 - .5% approved Food Stamp applications



Error Prone Application Verification

are those that indicate monthly income within \$100 (or annual income within \$1,200) of the income eligibility limits for free or reduced-price school meals

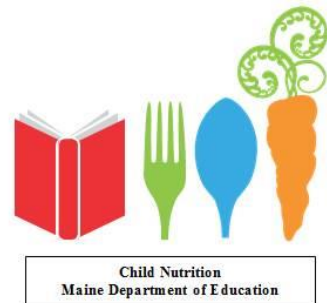


Error Prone Income

Monthly Family of 3	Yearly Family of 3	
2,113.00	25,346.00	
2,213.00	26,546.00	FREE
2,313.00	27,746.00	
3,049.00	36,577.00	
3,149.00	37,777.00	REDUCED

Approved Applications

As you are approving the applications, flag, put in a different stack, all Error Prone Applications



Error Prone Application?

- Family size = 3
- Income is \$2,254 monthly
- Is this an error prone application?

- **Monthly Family of 3**

2,113.00

F 2,213.00

2,313.00 YES 2,254 Reduced

3,049.00

R 3,149.00



Error Prone Application?

- Family size = 3
- Weekly income is \$730.00
- Is this an error prone application?

- Weekly Income = \$730
- Multiply by 52 = \$37,9600

- **Annual Family of 3**

25,008.00

F 26,208.00

27,408.00

36,096.00

R 37,296.00

37,440.00 NO, Denied

Can a District use an Alternate Method

If your Non Response Rate is less than 20%, in the previous school year, and you wish to use an alternate method the

district must receive approval from the State Agency. Include the method you plan to use.

Email: david.hartley@maine.gov



Standard, Alternate One

- Only Select 3% of the Approved Applications
 - Standard - Selection is from Error Prone
 - Alternate One- Selection from all approved applications, including Categorical.
- DO NOT OVER VERIFY

Sample Size

- Only count approved applications.
- Only count one application per family.
- Do not count applications for families that are also on the Direct Cert list.

Selecting the samples

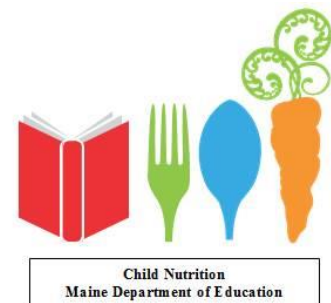
- Error Prone

- 3% of ALL free and reduced approved applications

- First select from error prone income approved applications

Selecting the samples

- If you need 5, and you have 10 error prone applications randomly select 5.
- If you do not enough error prone applications available, pull from remaining stack. You need 5, however you only have 4 EP, the last one is completely random from all approved applications, including categorical.



For each selected application, a school district official other than the Approving Official **MUST** conduct a confirmation review of the initial eligibility determination and correct any mistakes before attempting to verify the application.

Sign/initial & date each application



Unless:

- This does not apply to districts that use electronic application approval systems.
- However a good idea to make sure all the data was entered correctly.

Alternate Two - Focused

■ Alternate Two

- 1% income based approved applications
- Selection is from Error Prone applications, \$100 monthly or \$1200 yearly income.
- 0.5% Applications approved by case number. Food Stamp or TANF are only acceptable case numbers.

Procedure

- Contact the parents for documentation
 - Household Notification of Verification
 - Verification Information Update
 - Privacy Act Statement
 - Verification Documents

- 10 CALENDER DAYS-stick to the timeline.

Record Keeping

- Keep copies of ALL correspondence between the families and you.
- Keep notes of any phone conversations.
- Not just a copy of the master letter, but copies of each individual letter sent.

Household Notification of Verification

**YOU MUST INCLUDE A NO COST TELEPHONE
NUMBER FOR THE HOUSEHOLD TO CALL
SHOULD THEY HAVE QUESTIONS.**

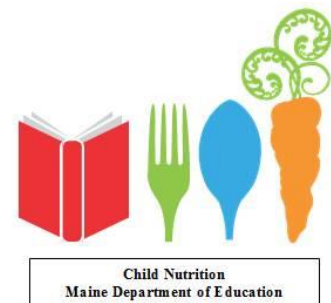


ME DOE CNS web page Forms

Verification Information Update

Privacy Act Statement

Verification Documents



Household Notification:

WE MUST CHECK YOUR APPLICATION

You must send the information we need, or contact [name] by [date], or your child(ren) will stop getting free or reduced price meals.

School: _____ Date:

Dear _____:

We are checking your Free and Reduced Price School Meals Application. Federal rules require that we do this to make sure only eligible children get free or reduced price meals. You must send us information to prove that **[name(s) of child(ren)][is/are]** eligible.

If possible, send copies, not original papers. If you do send originals, they will be sent back to you only if you ask.

1. IF YOU WERE RECEIVING BENEFITS FROM MAINE SNAP OR MAINE TANF WHEN YOU APPLIED FOR FREE OR REDUCED PRICE MEALS, OR AT ANY TIME SINCE THEN, SEND US A COPY OF ONE OF THESE:

- **[MAINE SNAP OR MAINE TANF Certification Notice that shows dates of certification.**
- Letter from MAINE SNAP OR MAINE TANF office that shows dates of certification.
- Do not send your EBT card.

2. IF YOU GET THIS LETTER FOR A HOMELESS, MIGRANT, OR RUNAWAY CHILD, PLEASE CONTACT **[school, homeless liaison, or migrant coordinator]** FOR HELP.



Verification Documents

UNEMPLOYMENT, DISABILITY, OR WORKER'S COMP: Notice of eligibility from State employment security office, check stub, or letter from the Worker's Compensation's office.

WELFARE PAYMENTS: Benefit letter from the Maine TANF office.

CHILD SUPPORT OR ALIMONY: Court decree, agreement, or copies of checks received.

OTHER INCOME (SUCH AS RENTAL INCOME): Information that shows the amount of income received, how often it is received, and the date received.

NO INCOME: A brief note explaining how you provide food, clothing , and housing for your household, and when you expect an income.

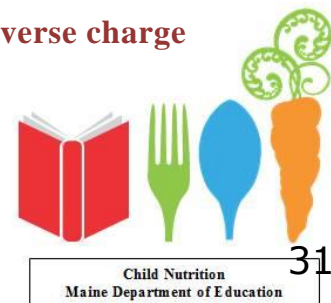
MILITARY HOUSING PRIVATIZATION INITIATIVE: Letter or rental contract showing that your housing is part of the Military Privatized Housing Initiative.

TIMEFRAME OF ACCEPTABLE INCOME DOCUMENTATION: Please submit proof of one month's income; you could use the month prior to application, the month you applied, or any month after that.

If you have questions or need help, please call **[name]** at **[phone number]**. The call is free. **[Toll free or reverse charge explanation]**. You may also e-mail us at **[e-mail address]**.

Sincerely,

[signature]



Non Discrimination Statement

- The Richard B. Russell National School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. We will use your information to determine if your child is eligible for free or reduced price meals, and for administration and enforcement of the lunch and breakfast programs.
- Non-Discrimination Statement: This explains what to do if you believe you have been treated unfairly.

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Evaluate Information Submitted

- Review information submitted and.
 - Make a determination if all information needed is present.
 - Request more information from parents.
 - Make sure YOU use the correct pay period calculations
- If no response make at least one additional contact attempt before denying benefits.

NO Response

- If no response make at least one additional contact attempt before denying benefits.
- The second attempt can be a phone call, give a deadline, a few days, keep notes.
- Stick to the timeline.

Evaluate Information Submitted

- if food stamp number check direct certification list
- check income monthly and/or yearly
 - If other convert to yearly.
- check schedule:
- Profit or Loss From Business - C line 29
- Profit or Loss From Farming - F line 34.

Form Page

Letter to Parents Self Denial

Letter to Parents, More Information

Internal Use: Household Control Form



Completion Form

- **WE HAVE CHECKED YOUR APPLICATION**

-

- School: _____ Date: _____

-

- Dear _____:

-

- We checked the information you sent us to prove that **[name(s) of child(ren)]** are eligible for free or reduced price meals and have decided that:

- Your child(ren)'s eligibility has not changed.

- Starting **[date]**, your child(ren)'s eligibility for meals will be changed **from reduced price to free** because your income is within the free meal eligibility limits. Your child(ren) will receive meals at no cost.

- Starting **[date]**, your child(ren)'s eligibility for meals will be changed **from free to reduced price** because your income is over the limit. Reduced price meals cost **[\$]** for lunch and **[\$]** for breakfast.

- Starting **[date]**, **your child(ren) is/are no longer eligible** for free or reduced price meals for the following reason(s):

- ___ Records show that no one in your household received *MAINE SNAP OR MAINE TANF* benefits.

- ___ Records show that the child(ren) is/are not homeless, runaway, or migrant.

- ___ Your income is over the limit for free or reduced price meals.

- ___ You did not provide:



Same form

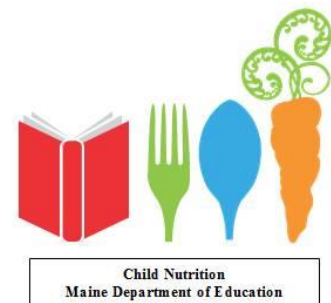
- ____ You did not respond to our request.
-
- Meals cost **[\$]** for lunch and **[\$]** for breakfast. If your household income goes down or your household size goes up, you may apply again. If you were previously denied benefits because no one in the household received *MAINE SNAP OR MAINE TANF* benefits, you may reapply based on income eligibility. If you did not provide proof of current eligibility, you will be asked to do so if you reapply.
-
- If you disagree with this decision, you may discuss it with **[name]** at **[phone]**. You also have the right to a fair hearing. If you request a hearing by **[date]**, your child(ren) will continue to receive free or reduced price meals until the decision of the hearing official is made. You may request a hearing by calling or writing to: **[name]**, **[address]**, **[phone number]**, or **[e-mail]**.
-

- Notify the family of the decision.
- If the category changed the family must be given the opportunity to appeal the decision. (included with notification).
- The change becomes effective in 10 calendar days if benefit is lost, if benefit is gained, effective immediately.

Once a family is selected for verification,
they are selected for the year

If they do not respond and reapply they will
need to submit documentation for verification
with the new application

They are NOT reapproved waiting for
documentation



What Is Income

- Before any deductions such as income taxes, social security taxes, insurance benefits, charitable contributions and bonds.

What Is Income

- Before any deductions such as income taxes, social security taxes, insurance benefits, charitable contributions and bonds.
- Cash received on a recurring basis.
- In-kind benefits are not cash payments therefore not income.

Common Questions

- Seasonal employment
- Temporary lay off
- Child support payments
- Self Employment
 - Schedule C, Line 29
 - Schedule F, Line 34
- Negative = zero

The Completion

- Completion deadline is November 15th.
- Documentation of dates and communication is very important.
- Copies of all correspondence must be kept for each family.

Record Keeping

- Keep all records for three years plus the current year
- Document everything
- Records are confidential
- Do not mail to DOE Food Service office

Where to Get More Information

- Eligibility Guidance from USDA

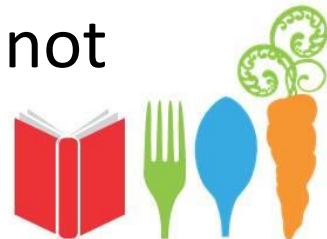
- <http://www.maine.gov/doe/nutrition/resources/documents/2017eligibilitymanual.pdf>

- Maine Department of Education Food Service Division 624-6842

- Form MUST be submitted online by
- NOVEMBER 20.
- This form is ONLY accepted online.

Do you need an extension?

- Did you not start the process in a timely manner and need an extension?
- Email david.hartley@maine.gov
- Include:
 - Why you need an extension
 - When you will complete the process
 - What steps will be taken so an extension is not needed in the future



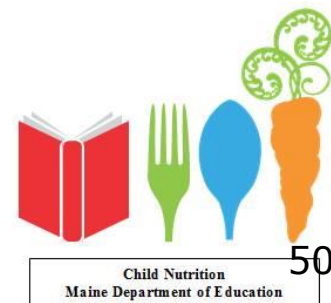
■ Verification Form

Verification Report

The Verification Report MUST be submitted online by November 20

Forms Page:

<http://www.maine.gov/doe/nutrition/forms/verificationreport.html>



FIRST INFO

- Name: Person completing verification.
- Phone Number: In case I need to call.
- Email: This is typically how I will respond.

Next:

- SFA ID#: can be obtained from your Claim Form.
- SFA City: of Mailing address.
- SFA Zip Code: Zip Code of above.

<http://www.maine.gov/doe/nutrition/forms/verificati>

Maine DOE - Verification C...

File Edit View Favorites Tools Help

Education Intranet
 State of Maine Remote Ac...
 Suggested Sites
 Dept Phone Numbers

Section 1

Total schools, residential child care institutions (RCCIs) and enrolled students	All SFAs must report Section 1	A. Number of schools or institutions	B. Number of students
	1-1: Total schools (Do not include RCCIs)	<input type="text"/>	<input type="text"/>
	1-2: Total RCCIs (Do not include schools counted in 1-1)	<input type="text"/>	<input type="text"/>
	1-2a: RCCIs with day students (Report <i>only</i> day students in 1-2a, column B)	<input type="text"/>	<input type="text"/>
	1-2b: RCCIs with <i>no</i> day students	<input type="text"/>	<input type="text"/>

<div>SFA Name</div> <div>Acton School Department </div>	<div>SFA City</div> <div><input type="text"/></div>	<div>SFA Zip Code</div> <div><input type="text"/></div>
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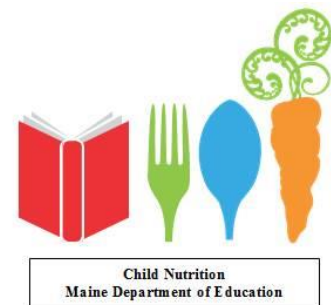
Section 1

Total schools, residential child care institutions (RCCIs) and enrolled students	All SFAs must report Section 1	A. Number of schools or institutions	B. Number of students
	1-1: Total schools (Do not include RCCIs)	<input type="text"/>	<input type="text"/>
	1-2: Total RCCIs (Do not include schools counted in 1-1)	<input type="text"/>	<input type="text"/>

Verification Report

- Section 5 pertains to the completed Verification process.

- 5-4 Total # of Error Prone Applications
- 5-5 Number of Applications Verified



5-6 & 7

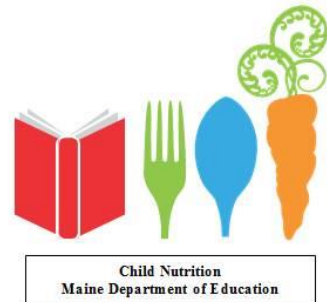
5-6: ☐ Check this box if direct verification was not conducted in the SFA (i.e., not one of the schools and/or RCCs in the SFA performed direct verification)
 If 5-6 is checked, skip 5-7

		A. Number of Applications	B. Number of students
Report if free and/or reduced price eligibility is confirmed through direct verification with SNAP/TANF/FDPIR/MEDICAID as of November 15	5-7: Confirmed through direct verification	<input type="text"/>	<input type="text"/>



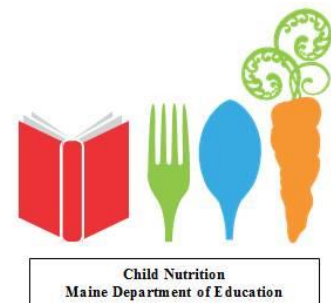
Section 5-8

Report only the results for the applications selected for Verification.



email address: david.hartley@maine.gov

Phone Number: 624-6878



Web Address Resource page

<http://www.maine.gov/doe/nutrition/forms/index.html>

<http://www.maine.gov/doe/nutrition/data/index.html>



VERIFICATION PROCEDURE FOR MISSING OR LATE REPORTS

PURPOSE: To provide a consistent plan for handling missing or late verification reports submitted to the State Agency.

- **2. A.** November 5 or within two days, reminder notices will be sent out about the verification process.
- **B.** November 20 or within two days, list of SAUs missing verification reports submitted to the Team Leader or designee.

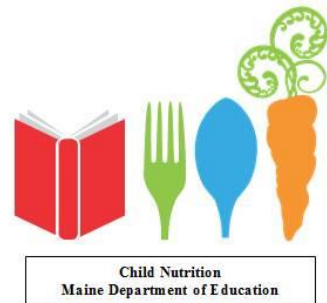
- December 1 or within two days, Child Nutrition Services staff will send reminder letters to Superintendents of SAUs without verification reports on file.
- December 10 Send second reminder letter
- December 15, revoke PW an ID's for claim form approval permissions to submit a claim for reimbursement.

- **5.** When the SAU' s verification report is received and correct, the Child Nutrition Office staff will reinstate passwords and permissions within three days.

- **6.** If a SAU is unable to meet the Federal required deadline, the Superintendent must contact the Department of Education, Child Nutrition Services via U.S. mail or electronically and request a waiver for an extension including the following: reason, estimated completion date and actions to be taken to meet deadline next school year. **Waivers will not be granted past 12/15 without NERO-FNS approval.**

Next Webinar

- After School Snack
- Tuesday, October 24



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